



**2009-2010 Dance/Gymnastics
August 2009 – June 2010
Monday, Tuesday or Wednesday
(Starting August 3, 2009)**



Members \$40.00 – Non- Members \$50.00

Payment must be made by the first class of the month or there will be a \$15.00 late fee applied.
\$5.00 discount for each additional class taken (dance or gymnastics) \$5.00 discount for each additional child.
If you have any questions regarding a class placement please contact Michelle Morgan at (270) 348-3301

Monday Dance Room 2	Tuesday Dance Room 2	Wednesday Dance Room 2	Wednesday Gym Room 1
4:15 – 5:00 Jazz/Tap Ages 4-6 yrs old (10 students max) 2-3 yrs exp	4:15 – 5:00 Tap/Ballet Ages 8 and up (10 students max) 3yrs exp	3:15 – 4:00 Ballet/Tap Ages 5-7 (10 students max)	3:15 – 4:00 Tumble Ages 6-11 (12 students max)
5:00 – 5:45 Combo Ages 3-4 yrs old (8 students max)	5:00 – 5:45 Tap/Jazz Ages 5-7 yrs old (10 students max) 3 yrs exp	4:00 – 4:45 Tap/Jazz Ages 5-7 (10 students max)	4:00 – 4:45 Rec Ages 3-5 (10 students max)
5:45 – 6:30 Jazz Ages 7-10 yrs old (12 students max) 2-3 yrs exp	5:45 – 6:30 Jazz Int Ages 8 and up (12 students max) 3 yrs exp	4:45 – 5:30 Combo Ages 3-5 yrs old (8 students max)	4:45 – 5:30 Rec Ages 5-11 yrs old (12 students max)
	6:30 – 7:00 Jazz Int-Adv Ages 12 and up (12 students max) 4 yrs. exp \$25.00/\$35.00		5:30 – 6:00 Tumble Adv Ages 11 and up (8 students max) \$25/\$35
	7:00 – 7:30 Tap Int-Adv Ages 12 and up (12 students max) \$25.00/\$35.00		

CHILD'S NAME: _____ AGE: _____ HOME #: _____

ADDRESS: _____

EMERGENCY CONTACT: _____ EMERGENCY #: _____

PARENT'S NAME: _____

Date: _____ Cash: _____ Credit: _____ Check #: _____ Receipt #: _____

Waiver and Release

I acknowledge that the Hopkinsville/Christian County Family YMCA carries Liability Insurance and does not provide health or accident insurance for its programs. In consideration of my participation I do hereby agree to hold free from any liability the Hopkinsville/Christian County Family YMCA, Board of Directors and its respective officers, employees, volunteers and do hereby for myself, my heirs, executors and administrators, waive, release and forever discharge all rights and claims for all injuries and damages occurred. I do hereby declare to be physically sound, having medical approval to participate in YMCA Dance program. I also hereby give the YMCA or other Medical Personal to obtain or give Medical Treatment.

Signature: _____ Date: _____

"Image" School of Dance & Gymnastics Release

The undersigned, as parent/guardian of _____
A child under age eighteen (18), give my permission to "Image" School of Dance & Gymnastics and staff for my child to participate in various dance or Gymnastics classes and training which we have contracted for. I understand that these classes involve physical actives and my child has no medical condition or disability which would prevent him/her from participating. In consideration of the classes and training, I understand that Image School of Dance & Gymnastics has no legal responsibility or liability for physical injury or accidents which may occur during the course of the dance or Gymnastic classes or training or on the premises. I will be solely responsible for any and all medical expenses or damages incurred on the premises and hold Image School of Dance & Gymnastics, Hopkinsville YMCA, and Staff harmless from such expenses or damages.

I, the parent of _____, give my permission for emergency medical treatment of my child if I can not first be contacted.

Signed this _____ Day of _____

x _____
(Parent/Guardian)

